

# CITY OF NASHUA

## ARTS COMMISSION ACCREDITATION APPLICATION

The Arts Commission of the City of Nashua Accreditation program varies in terms of their application requirements and interests. Members of the arts community may apply for accreditation as an individual, event or organization.

The City of Nashua has established an accreditation program to recognize the contributions that have been made by local artists, non-profit organizations, for profit organizations and special events which have demonstrated a continued commitment to enriching the lives of area residents through the Visual and the Performing Arts.

Applicants must have demonstrated a commitment to the arts through a consistent expenditure of their own resources to provide programs, which benefit the Nashua community at large.

If you have questions about the application or review process, please call City Hall at (603) 589-3260.

### DIRECTIONS

- Feel free to send materials other than those requested, however, please do not send any materials under separate cover.
- Send only one copy and do not staple or bind your application.
- This application can be completed in two ways: 1) open it in Microsoft Word and click on the shaded areas to **type** in your answers (preferred); or 2) you can type your answers on a separate sheet of paper. Please use a font size of at least 11 point.
- You may submit an electronic copy of the application, along with attachments of additional requested documentation, to [grantapp@nashuanh.gov](mailto:grantapp@nashuanh.gov).

Or

- Mail this application to:

**City Hall  
Mayor's Office  
Attn: Performing Arts Grants  
229 Main Street  
Nashua NH 03060**

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### CHECKLIST

Please use this checklist to ensure that your application contains all required information and attachments.

**Incomplete proposals will not be reviewed.**

- ☐ Completed application form (including required signatures)
- ☐ 501(c)(3) letter from IRS if applicable
- ☐ List of the organization's governing board, advisory board, and all employees if applicable
- ☐ A single copy of your organization's most recent complete audited financial statement, or IRS form 990 if applicable

# **CITY OF NASHUA**

## **ARTS COMMISSION ACCREDITATION APPLICATION**

### **PART I: APPLICANT INFORMATION**

**INDIVIDUAL:      ORGANIZATION:      EVENT:      OTHER:**

**LEGAL NAME OF ORGANIZATION:**

**ADDRESS:**

**CITY/ STATE /ZIP:**

**TELEPHONE:**

**WEBSITE:**

**YEAR ORGANIZATION STARTED:**

**FEDERAL TAX I.D. # (EIN):**

**EXECUTIVE DIRECTOR:**

**PRIMARY CONTACT FOR PROPOSAL:**

**TELEPHONE:**

**E-MAIL:**

**PLEASE PROVIDE A BRIEF OVERVIEW OF THE PROGRAM/SERVICE:**

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## **ARTS COMMISSION ACCREDITATION APPLICATION**

### **PART II: PROGRAM DESCRIPTION**

This form is required as part of your application.

**Format:** You may complete this form in Microsoft Word using the form fields or number and write your answers on a separate page with a font size no smaller than 11 point.

**1. WHAT IS THE OVERALL GOAL OF THIS PROGRAM?**

**2. HOW IS YOUR ORGANIZATION FUNDED?**

**3. HOW WILL YOUR PROJECT, EVENT OR ORGANIZATION BENEFIT THE NASHUA COMMUNITY?**

**4. WHO IS SERVED BY OR PARTICIPATES IN THIS PROGRAM?**

# **CITY OF NASHUA**

## **ARTS COMMISSION ACCREDITATION APPLICATION**

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SIGNATURE OF PRESIDENT, CHIEF ADMINISTRATIVE OFFICER, OR  
TREASURER

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DATE

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PRINT NAME

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TITLE

### **CITY OF NASHUA NON-DISCRIMINATION POLICY**

The City of Nashua seeks to promote respect for all people. In its community-building and capacity-building grant making (or successor grant programs supported by those funds), the city will support organizations that do not intend to deny services, employment, or volunteer involvement on the basis of race, age, ancestry or national origin, sexual orientation, gender, physical or mental disability, or religion. It is not the intent of this policy to deny support for programs that serve specifically defined populations. By signing this form, the applicant organization confirms that it is in compliance with this policy.

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SIGNATURE OF PRESIDENT, CHIEF ADMINISTRATIVE OFFICER, OR  
TREASURER

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DATE

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PRINT NAME

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TITLE